Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

Approved for use through 1/31/2007, OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875   |   |   |                                     |   |                  |   | Application or Docket Number<br>10/542,774 |                        |    | ing Date<br>18/2006   | ☐ To be Mailed         |
|---|---|---|-------------------------------------|---|------------------|---|--|------------------------|----|-----------------------|------------------------|
| APPLICATION AS FILED – PART I<br>(Column 1) (Column 2)  |   |   |                                     |   |                  |   | SMALL ENTITY 🛛                             |                        |    |                       | HER THAN<br>ALL ENTITY |
| FOR   |   |   | UMBER FI                            | .ED NUI   | MBER EXTRA       |   | RATE (\$)                                  | FEE (\$)               |    | RATE (\$)             | FEE (\$)               |
|   | BASIC FEE<br>(37 CFR 1.16(a), (b),                              | or (c))                                   | N/A                                 |   | N/A              | 1 | N/A  |                        | ı  | N/A                   |                        |
|   | SEARCH FEE<br>(37 CFR 1 16(k), (i),                             | or (m))                                   | N/A                                 |   | N/A              | 1 | N/A  |                        | l  | N/A                   |                        |
|   | EXAMINATION FE<br>(37 CFR 1 16(o), (p),                         |   | N/A                                 |   | N/A              |   | N/A  |                        | l  | N/A                   |                        |
| TO'<br>(37  | FAL CLAIMS<br>CFR 1.16(i))                                      |   | minus 20 = *                        |   |                  | 1 | x \$ = 1                                   |                        | OR | x s =                 |                        |
| IND<br>(37  | EPENDENT CLAIM<br>CFR 1.16(h))                                  | IS  | minus 3 = *                         |   |                  | 1 | x \$ =                                     |                        | 1  | X S =                 |                        |
|   | APPLICATION SIZE<br>37 CFR 1.16(s))                             | FEE shee<br>is \$2<br>addi                | ts of pap<br>50 (\$125<br>tional 50 | specification and drawings exceed 100 s of paper, the application size fee due 0 (\$125 for small entity) for each noal 50 sheets or fraction thereof. See S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                  |   |  |                        |    |                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))   |   |   |                                     |   |                  |   |  |                        | ı  |                       |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2.   |   |   |                                     |   |                  |   | TOTAL                                      |                        |    | TOTAL                 | L                      |
| APPLICATION AS AMENDED - PART II         OTHER THAN           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL ENTITY   |   |   |                                     |   |                  |   |  |                        |    |                       |                        |
| AMENDMENT   | 03/28/2011  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                     | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR   | PRESENT<br>EXTRA |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$) |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |
|   | Total (37 CFR<br>1.16())  | * 28                                      | Minus                               | 28  | = 0              |   | X \$26 =                                   | 0                      | OR | X \$ =                |                        |
|   | Independent<br>(37 CFR 1.16(h))                                 | • 2                                       | Minus                               | 3   | <b>-</b> 0       |   | X \$110 =                                  | 0                      | OR | X \$ =                |                        |
|   | Application Size Fee (37 CFR 1.16(s))                           |   |                                     |   |                  |   |  |                        |    |                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |   |                                     |   |                  |   |  |                        | OR |                       |                        |
|   |   |   |                                     |   |                  |   | TOTAL<br>ADD'L<br>FEE                      | 0                      | OR | TOTAL<br>ADD'L<br>FEE |                        |
| (Column 1) (Column 2) (Column 3)  |   |   |                                     |   |                  |   |  |                        |    |                       |                        |
| AMENDMENT   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                     | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR   | PRESENT<br>EXTRA |   | RATE (\$)                                  | ADDITIONAL<br>FEE (\$) |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |
|   | Total (37 CFR<br>1,16())  |   | Minus                               |   | =                |   | X \$ =                                     |                        | OR | x s =                 |                        |
| №   | Independent<br>(37 CFR 1 16(h))                                 |   | Minus                               | ***   | -                | l | x s =                                      |                        | OR | x s =                 |                        |
| Ę.  | Application Size Fee (37 CFR 1.16(s))                           |   |                                     |   |                  | l |  |                        |    |                       |                        |
| A   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |   |                                     |   |                  | ı |  |                        | OR |                       |                        |
|   |   |   |                                     |   |                  |   |  |                        | OR | TOTAL<br>ADD'L<br>FEE |                        |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20".  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For I (Total or Independent) is the highest number found in the appropriate box in column 1.  The "Highest Number Previously Paid For I (Total or Independent) is the highest number found in the appropriate box in column 1.  The collection of Internation is seen but 37 (ZFE) 1.6 The internation is seen inswerted nothing or enters in a partial first the public which is filler and by the ILSETO to |   |   |                                     |   |                  |   |  |                        |    |                       |                        |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to life (and by the DSFT0 to process) an application. Confidentiality is governed by 35 US. of .22 and 37 CFR 1.14. This collection is estimated to beta 21 minutes to complete, including gathering preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or supposetions for reducing this burden, should be sent to the Chief information Cliber. U.S. Patient and Trademark Office, U.S. Department of Commono. P.O. Box 1496, Alexandria, V. 2231-0. Dox 1496, 1409. DO NOT SEND FEES OR COMPLETED FORMS TO THIS AUDIESS. SEND TO \*\*Commissions of the processing of the common sent of the common sent